Approved for use through 7/31/2006. OMB 051 0001 PTO/SB/0 (12-04)

Under the Paperwork Reduction Act of 1895, no persons are required to respond to a collection of information uniters & displays a wald OMB control rumber. PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Humber Substitute for Form PTO-875 Effective December 8, 2004 618 473 APPLICATION AS FILED - PART I (Column 1) OTHER THAN (Column 2) SMALL ENTITY OR SMALL ENTITY MUMBER FLED NUMBER EXTRA BASIC FEE RATE (T) FEE G RATER (3) CFR 1.16(a), (U, a) (c)) NIA 150.00 SEARCH FEE NA 30000 (2) OFR 1 16(1) (1) OF (14) NA. NA \$250 N/A \$500 N/A (37 CFR 1.16(d), (p), or (q)) N/A NA \$100 TOTAL CLAIMS NIA \$200 P? CFR 1.16(8) X\$ 25 ... minus 20 a INDEPENDENT CLAIMS X\$50 OR (37 CFR 1.16(N) minus 3 + X100 X200 lithe specification and drawings exceed 100 APPLICATION SIZE sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each (37 CFR 1.16(d)) additional 50 sheets or traction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(I)) +180= +360= "If the difference in column 1 is less than zero, enter "O" in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3) OTHER THAN SMALL ENTITY OR CLAIMS SMALL ENTITY HIGHEST REMAINING NUMBER PREVIOUSLY PRESENT. RATE (1) AFTER ADDI-ENDMENT EXTRA RATE (S) AMENDMENT -ADDI-TIONAL HONAL PAID FOR Total FEE (1) DI CER LIGHT (V FEE (1) X\$ 25 X\$50 Independent DICER LIELE Minus OR X100 X200 Application Size Fee (37 CFR 1.16(s)) CAR FIRST PRESENTATION OF MEATURLE DEPENDENT CLAIM (17 CFR 1.160) +180= +360= OR TOTAL TOTAL ADO'L FEE' 2/04 OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST REMAINING ω NUMBER PRESENT RATE (5) AFTER PREVIOUSLY PAID FOR ADDI: EXTRA RATE (1) ADDI-TIONAL AMENDMENT TIONAL Total OF CFR LIGHT FEE (1) Minus ξ FEE (II) X\$ 25 independent profit Liepp X\$50 OR Minus X100 Application Size Fee (37 CFR 1.16(s)) X200 OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.140) +180= +360= OR TOTAL It libe entry in column 1 is less than the entry in column 2, write "o' in column 3.

"If the Highest Number Previously Paid For' IN THIS SPACE is less than 20, enter "20".

The Highest Number Previously Paid For' IN THIS SPACE is less than 3, enter "3".

The Highest Number Previously Paid For' IN THIS SPACE is less than 3, enter "3".

This collection of Information is required by 37 CFR 1.16. The Information is required to obtain by retain a banged by the pulper which is to lite (and by the pulper which is to lite (and by the hostiding gathering, preparing, and submitting the completed explication form to the USPTO. Time will very depending upon the individual case. Any completed, on the amount of time you require to complete this form and/or expressions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. OO NOT SEND FEES OR COUNTERED FORMS TO THIS ADORESS, SEND TO: Control science for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. TOTAL ADD'L FEE OR

ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.